Attorney's Docket No.: 12385-002001

Client's Ref. No.:

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

Marblehead, MA 01945

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled WIRELESS FINANCIAL TRANSACTIONS, the specification of which:

	ttached hereto.		
[] was	s filed on _ as Application Serial	No and was amended on	•
[] was	s described and claimed in PCT I	nternational Application No.	filed on
	and as amended	d under PCT Article 19 on	
	state that I have reviewed and unns, as amended by any amendme	derstand the contents of the above-identient referred to above.	fied specification,
	rledge the duty to disclose all info Federal Regulations, §1.56.	ormation I know to be material to patenta	ibility in accordance with
•	appoint the following attorneys a tent and Trademark Office conne	and/or agents to prosecute this application acted therewith:	and to transact all
David L. Feigenb John F. Hayden, F	aum, Reg. No. 30,378 Reg. No. 37,460	Robert E. Hillman, Reg. No. 22 Timothy A. French, Reg. No. 3	
Address	all telephone calls to DAVID L.	FEIGENBAUM at telephone number (61	17) 542-5070.
Address	all correspondence to DAVID L.	FEIGENBAUM at:	
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	klin Street		
Boston, I	MA 02110-2804		
		herein of my own knowledge are true and	
		true; and further that these statements we	
		e so made are punishable by fine or imprand that such willful false statements ma	
	or any patents issued thereon.	and that such within faise statements ma	ty jeopardize the validity
	or unity purchase 10011011 initiation.		
Full Name of Inve	entor: NEIL P. HUDD		
Inventor's Signati		Date:	
Residence Addres	•		
C:4:1:	Marblehead, MA 01945		
Citizenship: Post Office Addre	U.S.A. ess: 4 Valley Road		
T OST OTHER WANT	oo. 🛨 vancy koau		

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Combined Declaration and Power of Attorney Page 2 of 2 Pages

Full Name of Inventor:	ORIN ANDERSON		
Inventor's Signature:		Date:	
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